**Document Number Only** 97000000372 C T CORPORATION SYSTEM Requestor's Name 660 East Jefferson Street **Address** Tallahassee, Florida 32301 City State Zlp Phone **CORPORATION(S) NAME** Cyber Mark L.L.C. 500002222855--0 <u>-06/25/37--01094</u>--001 \*\*\*\*346.25 \*\*\*\*346.25

() Profit () NonProfit X Limited Liability Company	() Amendment	() Merger
(A) Foreign	() Dissolution/Withdray	wal () Mark
() Limited Partnership () Reinstatement () Limited Liability Partnership Certified Copy	( ) Annual Report ( ) Reservation ( ) Photo Copies	() Other () Change of R.A. () Fictitious Name
() Call When Ready  Walk In  () Mail Out	() Call if Problem () Will Wait	() After 4:30 ————————————————————————————————————
Name Availability  Document Examiner  Updater  Veriller  Acknowledgment	6/25/97	PLEASE RETURN EXTRA GOPY(S) FILE STAMPED'S FILE STAMPED'S AN IO: 58
W.P. Verifier CR2E031 (1-89)	Y. BANK SALANCE DUE	1/1

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.		<u>c.</u>				DLY.
	(Name of foreign limited liability of "L.C." if not so contained in the r	company must name at preser	end with the v	vords "limit	ed company" or the	eir abbreviafior
2.	Delaware			a	31-1478386	JUH 23
	(Jurisdiction under the law of wh company is organized)	ich foreign limi	ted liability	J	31-1478386 (FEI number, if app	licable) P
4.	8/28/96	5	<b>.</b>	2004		2:5
	(Date of Organization)	<del>-</del>	(Duration: Ye or "perpetua	ar timited 1: I")	ability company wil	cease to exist
ô.	5/15/97					
	(Date first transacted business in	Florida. (See se	ections 608.501, 60	08.502 and 81	7.155, F.S.)	
7.	4171 ArlinGate Plaza	a				
	Columbus, OH 43228				<del></del>	
		dress of princi	pal office)			
	List and indicate in title spar member [MGRM] or manage (attach additional page if necessary) NAME & ADDRESS:	BELIVIGICI. IT	is not neces	sary to lis	t members.  DDRESS:	TITLE:
			•,		DONESS.	IIILE.
-	James B. Graham	MGR				
_	4171 ArlinGate Plaza					
	Columbus, OH 43228					•
_						•
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•			-	<u>.</u>		-
						-

Filing Fee: \$ 52.50 for Application

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

		CRETIFIED IN 23
The undersigned member or authorized representative o	f a member of	
CyberMark L.L.C.	_ deposes and says:	PH 12: 58
1) the above named limited liability company has at least	two members	_
2) the total amount of cash contributed by the member(s	) is \$ <u>5,500,000</u>	. •
3) if any, the agreed value of property other than cash co \$_27,500,000 A description of the property is	ontributed by member(s) s attached and made a p	is part hereto.
4) the total amount of cash or property anticipated to be \$\frac{33,000,000}{}. This total includes amounts from	contributed by member(s 2 and 3 above.	s) is
THE HUNTINGTON NATIONAL BANK, MEMBER		
Signature of a member or authorized representa		

constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Filing Fee: \$52.50 for Affidavit

#### NON-CASH CAPITAL CONTRIBUTIONS

Research and development services

Intellectual property

Expertise regarding access of banking functions, electronic funds transfer and card technology

Patent applications

Trade mark and service mark applications

Assets - equipment and property

Licenses

COLUMBUS/0348978 01

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The nam	e of the limited liability company is: _	CyberMark L.L.C.
2.	The nam	ne and address of the registered agent ar	nd office is:
		C T CORPORATION S	SYSTEM
		(Name)	
		c/o C T CORPORATION, 1200 Sout (P.O. Box not acce	
		Plantation, Florid (City/State/Zip)	a 33324
state the c comp	d limited li appointmen oly with the luties, and	ability company at the place designa it as registered agent and agree to a e provisions of all statutes relating to	cept service of process for the above ted in this certificate, I hereby accept act in this capacity. I further agree to the proper and complete performance of bligations of my position as registered
	CT	CORPORATION SYSTEM	

FILING FEE: \$ 35 for Designation of Registered Agent

6123 I97

(Date)

COMME BRYAN

SLECIM REPROPUL SELECTION

(Signature)

### State of Delaware

### Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CYBERMARK L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF JUNE, A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

97 JUN 23 PH 12: 58

Edward J. Freel, Secretary of State

AUTHENTICATION

8519719

971202356

2657809 8300

DATE

06-19-97